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S.D. SEC. OF STATE

## STATE OF SOUTH DAKOTA

## Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Lawrence County Journal		2. DATE 10/01/06
3. FREQUENCY OF ISSUE Twice Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 104	3B. ANNUAL SUBSCRIPTION PRICE \$ 48.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 376 Main St STE A, Deadwood, Lawrence, SD 57732		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 144 W Hudson St, Spearfish, Lawrence, SD 57783		
6. FULL NAME OF PUBLISHER: Hollie Stalder		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="text-align: center;">FULL NAME</p> <p>Lee Enterprises</p> </div> <div style="width: 45%;"> <p style="text-align: center;">COMPLETE MAILING ADDRESS</p> <p>201 N Harrison St, Davenport, IA 52801</p> </div> </div>		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. Attached		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	2354	1944
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and counter sales.	1056	1061
2. Mail Subscription (Paid and or requested)	359	281
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	1415	1342
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	388	13
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1803	1355
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	166	189
2. Return from News Agents	385	400
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	2354	1944

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public  
I swear that the statements made by me are true, correct, and complete:

  
(Signature)

Publisher

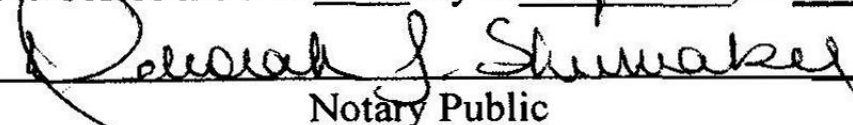
(Title)

State of South Dakota )

County of Lawrence )

(Seal)

Sworn to before me this 29th day of September 2006

  
Notary Public

My commission expires: 9-9-10